

STATE OF CALIFORNIA—HEALTH AND HUMAN SERVICES AGENCY DEPARTMENT OF SOCIAL SERVICES

744 P Street • Sacramento, CA 95814 • www.cdss.ca.gov



CHILD CARE UPDATE Community Care Licensing Division Fall 2014

Child Care Licensing Program Mission:

The Child Care Licensing Program licenses and monitors Family Child Care Homes and Child Care Centers in an effort to ensure that they provide a safe and healthy environment for children who are in day care.

In keeping the child care community informed about licensing programs and requirements and services, the Updates continue to be an important method for sharing information.

We appreciate your support in sharing these Updates with those in your organization and others interested in child care issues. You may find the topic of your choice in each Update by clicking on the link provided in the "Inside This Issue" and "Extra! Extra! Headings" table on the right side of this page. Click on the underlined feature and you will be taken to that area of the Update.



Effective July 1, 2014, fees have increased by 10% for Child Care Centers and Family Child Care Homes.

Description	Capacity	Application \$	Annual \$	Late \$	Location change	Probation \$
Family Child Care Home	1-8	73	73	36	36	73
	9-14	140	140	70	70	140
Child Care Centers	1-30	484	242	121	242	242
	31-60	968	484	242	484	484
	61-75	1210	605	302	605	605
	76-90	1452	726	363	726	726
	91-120	1936	968	484	968	968
	121+	2420	1210	605	1210	1210

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Caregiver Background Check Bureau (CBCB), important phone

numbers:

Information line: 1-888-422-5669

DOJ Automated Applicant Response System: (916) 227-4557

Customer Service: (916) 653-1929

CBCB-Fingerprinting



Licensing Management Information



Kathy Ertola

Kathy Ertola, Regional Manager of the River City Child Care Regional Office, retired on October 30, 2014, and the entire Department wants to wish her well as she starts her new journey in life. Kathy has worked for the State for 33 years and began her career as a Rehabilitation Therapist at Agnews Developmental Center in San Jose in 1981. Kathy transferred to the California Department of Social Services (CDSS), Community Care Licensing Division in 1986 and has had a number of other positions within the Department, including Licensing Program Analyst and Staff Services Manager I in the Child Care Licensing Program. In 2006, Kathy promoted to a Staff Services Manager II and was the Chief of Administrative Services for the Legal Division. In 2008, she became the Regional Manager of the River City Child Care Regional Office. Kathy has devoted her career to working with vulnerable populations and ensuring that children and adults are protected. She has always advocated for clients in care and has built strong relationships in the community with partners and stakeholders. Her leadership skills are outstanding and she will be missed by her staff and all of us who have known her and worked with her.

Peggy Hansen

We want to wish Peggy Hansen, Licensing Program Manager of the Rohnert Park local unit, a happy retirement after completing 15 years of state service! Peggy started her career with the California Department of Social Services (CDSS) in 1999. She has worked in several different programs within CDSS, including working in the Children's Residential Policy Bureau and the Welfare-to-Work Program.





Licensing Requirements



Contagious Illness Procedures & Requirements

Contagious outbreaks of <u>Hand, Foot and Mouth Disease</u> (HFMD) have been reported at child care facilities in Southern California. Providers should follow these procedures for outbreaks:

Requirements for Child Care Centers

Training: All personnel must have on-the-job training in the recognition of early signs of illness.

Attendance and Record Keeping Procedures: Centers should have clearly written inspection and record keeping procedures for illnesses involving staff and children. This is to ensure previously ill children are inspected and children with obvious symptoms are not admitted.

Requirements for Child Care Centers & Family Child Care Homes

- ✓ **Observe and Isolate**: The behavior and health of the children should be continually observed. It is especially important that once a child appears ill that they are properly isolated away from direct contact with the other children and common play areas. Child Care Centers are responsible for establishing an "isolation area", for children who appear ill, that meets the specific requirements found in <u>Title 22 Regulations</u>, <u>Section 101226.2</u>.
- ✓ Record and Contact: Any unusual behavior and/or signs of illness requiring assessment or first aid shall be recorded in the child's records with the date of occurrence. Centers are to immediately notify the child's guardian and request their ill child be picked up. Family Child Care Homes have more discretion in continuing care of ill children whose illness is not due to a contagious outbreak, but they must immediately notify the child's guardian and safely isolate the ill child from common use areas and away from the other children in care.
- ✓ Assess and Notify: Centers and Homes must follow-up with an ill child's guardian or physician to assess the cause of their illness. If it is determined to be caused by a communicable disease (like HFMD) providers *must* contact the authorized guardians for all children enrolled at that facility to notify them of their child's exposure to contagious illness.
- ✓ Outbreak Reporting: If you experience signs of a potential or suspected contagious outbreak involving two or more children, you must report it to your Local Health Department. You must also complete an "Unusual Incident/Injury Report" using the Licensing Form LIC 624B for Homes and LIC 624 for Centers and submit that form to your local Child Care Licensing Regional Office on the next business day either by fax or by mail.
- ✓ Follow-up and Prevention: Do not readmit previously ill children until it is fully determined they are no longer contagious. Clean all common areas and surfaces that may have been contaminated with non-toxic/safe cleaners and disinfectants. Prevention Tips







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Chaptered Legislation



Assembly Bill (AB) 1819: Family day care home: Smoking Prohibition.

AB 1819 prohibits the smoking of tobacco in a Family Child Care Home, and in the areas where children are present.

Assembly Bill (AB) 2236: Care Facilities: Civil Penalties.

AB 2236 increases the amount of civil penalties that may be imposed for a violation that results in the death of, or serious bodily injury or physical injury to, a resident or client.

Assembly Bill (AB) 2386: Care Facilities: Carbon Monoxide Detectors.

AB 2386 requires community care facilities; residential care facilities for the elderly; residential care facilities for persons with chronic, life-threatening illnesses; and child care facilities to have one or more functioning carbon monoxide detectors that meet specified statutory requirements in the facility and requires the Department to account for the presence of the detectors during inspections.

Assembly Bill (AB) 2621: Child Day Care Facilities: Licensing Information.

AB 2621 requires the California Department of Social Services to post licensing information on its website, to be updated at least monthly. This information must include: the name of the facility and the address (exception: family day care home addresses will not be posted); the status of the license and its capacity; the number of site visits, including noncomplaint inspections; the number of substantiated and inconclusive complaint inspections; and the number of citations assessed during the preceding five-year period.

A summary and implementation plan for these chaptered bills will be forthcoming and will be available on the community care licensing website. Unless otherwise noted in the implementation plan, these bills are effective January 1, 2015. Licensees are encouraged to review the plans to ensure compliance with the provisions of these bills. If you have any questions you are encouraged to contact your local licensing office.





Health and Safety Information

The Truth About Lead Paint

Was Your Child Care Facility Built Before 1978? If Yes, Then:

Where does The Lead Danger Come from Today?

In earlier decades, the fear of children eating lead paint chips was the main concern when it came to poisoning. But since then, research has shown that the most common way to get lead in the body is from inhaling or ingesting microscopic dust.

Day-to-day wear, as well as common renovation and repair activities, like sanding, cutting and demolition, can create hazardous lead dust and chips. Proper work practices can help protect the children in your building.

Even for small jobs, the key is to use lead—safe work practices such as containing dust inside the work area, using dust-minimizing work methods and conducting a careful cleanup. It also means keeping people out of the work area. Most importantly, it means making sure that anyone who does work in your building is Lead-Safe Certified.



How do I Choose the Right Contractor?

As a child care provider:

- Hire only contractors who are lead–safe certified to work in a building built prior to 1978.
- Verify that a contractor is certified by checking the EPA website at <u>epa.gov/getleadsafe</u> or by calling: 1-800-424-LEAD.
- Ask if the contractor is trained to perform lead—safe work practices and ask to see a copy of their lead—safe training certificate.
- Make sure your contractor can explain clearly the details of the job and how the firm will minimize lead hazards to the work place.
- Ask what lead-safe methods will be used to perform the job in your facility.
- Always make sure the contract is clear about the work that will be performed.

To learn more about lead poisoning, please visit epa.gov/getleadsafe









Reminder about Swimming Pools

It is the responsibility of the licensee to ensure the inaccessibility of pools, including swimming pools (in-ground and above ground), fixed-in place wading pools, hot tubs, spas, fish ponds or similar bodies of water, through a pool cover or by surrounding the pool with a fence.

NOTE: Child Care Center fencing requirements are not required for inflatable or portable wading pools with sides low enough for children to step out unassisted; however, these pools should be emptied after each use.

BODIES OF WATER (IN-GROUND) REQUIREMENTS

The fence is to be at least five feet high and constructed so that the fence does not obscure the pool from view.

- ✓ The bottom sides of the fence are to comply with Division I, Appendix Chapter 4 of the 1994 Uniform Building Code.
- ✓ Fences and gates are to swing away from the pool, self-close, and have a self-latching device located no more than six inches from the top of the gate.
- ✓ Pool covers are to be strong enough to completely support the weight of an adult and be placed on the pool and locked while the pool is not in use.

BODIES OF WATER (ABOVE-GROUND) REQUIREMENTS:

- Must be made inaccessible when not in use by removing or making the ladder inaccessible, or erecting a barricade to prevent access to decking.
- If a barricade is used, the barricade shall meet the above requirements for bodies of water in-ground.

An operative pump and filtering system is required for all in-ground pools and all above-ground pools that cannot be emptied after each use.

You may read more about swimming pool requirements in <u>Title 22</u>, SECTIONS 101238.5, 101238 (e) and 102417 (e).







Extra! Extra! Headlines

Are You In? Family Child Care Providers' Experiences in Quality Improvement Initiatives.

Family child care homes are important in California's mixed-delivery system, but little research has examined their unique contribution. California is making big changes in early education and care, so understanding family child care homes is more important now than ever.

The California Child Care Research Partnership at the California State University, Northridge, is conducting a study to examine daily life in family child care homes.

This research examines the benefits and challenges of the California Race to the Top Early Learning Challenge (RTT- ELC) for participating and non-participating providers.

We are looking for family child care providers who are willing to participate.

Further information about the project can be found on the partnership website: http://www.areyouinpartnership.com/

If you are a family child care provider, there are two ways for you to share your views with us right now!

- There is a "contact us" link on the project website for some general, brief comments.
- There is a voluntary survey you can complete online (in English or Spanish) that provides us with more information and takes about 15-30 minutes.

Click here to start the survey!

This project is supported by the Child Care Research Partnership Grant Program, Grant Number 90YE0153, from the Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.

The contents are solely the responsibility of the authors and do not necessarily represent the official views of the Office of Planning, Research and Evaluation, the Administration for Children and Families, or the U.S. Department of Health and Human Services.







Stop Bullying!

Parents, licensing staff, and organizations all have a role to play in supporting all kids involved in bullying.

It's important to make sure that bullying doesn't continue and effects can be minimized.

Make sure the child knows what the problem behavior is.

Young people who bully must learn their behavior is wrong and harms others.

Show kids that bullying is taken seriously.

Calmly tell the child that bullying will not be tolerated. Model respectful behavior when addressing the problem.

Work with the child to understand some of the reasons he or she bullied.

For example:

Sometimes children bully to fit in. These kids can benefit from participating in positive activities. Involvement in Sports and clubs can enable them to

take leadership roles and make friends without feeling the need to bully.

- Sometimes kids act out because of something else going on in their lives such as issues at home, abuse, stress, etc. They also may have been bullied.
- These kids may be in need of additional support, such as mental health services.

Use consequences to teach.

Consequences that involve learning or building empathy can help prevent future bullying.

 Facility staff should remember to follow the guidelines in Title 22 regulations and other policies in developing consequences and assigning discipline.

The goal is to help them see how their actions affect others.

Involve the kid who bullied in making amends or repairing the situation.

For example, the child can:

- Write a letter apologizing to the student who was bullied.
- Clean up, repair, or pay for any property they damaged.

Follow-up. After the bullying issue is resolved, continue finding ways to help the child who bullied understand how what they do affects other people.

For example, praise acts of kindness or talk about what it means to be a good friend.

For more information about Bullying visit:

Stopbullying.gov











Child Care Statistics Web Access



If you have questions about items included in this Update, suggestions for future topics, or would like to be added to our mailing list, please send an email to: cclp@dss.ca.gov. You may also visit our internet website at www.ccld.ca.gov to obtain past Child Care Updates, and to learn more about child care licensing.

Sincerely,

Original signed by Pamela Dickfoss

PAMELA DICKFOSS
Deputy Director
Community Care Licensing Division

The Community Care Licensing Division Child Care Update is published by the Child Care Licensing Program, for the benefit of Licensees, Parents, and Stakeholders.

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